

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
UTILITY PATENT APPLICATION TRANSMITTAL

FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER: **William G. Howard et al.**TITLE: **HEADSPACE INSULATOR FOR ELECTROCHEMICAL CELLS**

CERTIFICATE UNDER 37 CFR §1.10: I hereby certify that this Utility Patent Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelope addressed to: Mail Stop Patent Application, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450, *EXPRESS No. EV 331 791 894 US, on this 26th day of November, 2003.

22390 U.S. PTO
 10/723317
 112603

Paul H. McDowall
 Printed Name Paul H. McDowall
 Signature [Signature]

MAIL STOP PATENT APPLICATION

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

We are transmitting herewith the attached:

☒ **Patent Application Transmittal**☒ **Specification:****Total pages:** 19 (including claims and abstract: Spec. 14 sheets; Claims 4 sheets; Abstract 1☒ **Drawings:**Total sheets: 7☐ formal☒ informal☒ **Combined Declaration and Power of Attorney:**☒ **Unexecuted**☐ copy from prior application☐ Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))☐ Incorporation by Reference - *The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.*☒ **Accompanying application parts:**☐ Notification of filing a☐ Assignment of the Invention to Medtronic, Inc.☐ Assignment cover sheet☐ Information Disclosure Statement☐ PTO Form 1449☐ Copies of IDS citations☐ Preliminary Amendment☐ A copy of the Petition or Conditional Petition for Extension of Time in the prior application.☒ Return Postcard**IF A CONTINUING APPLICATION:**☐ **Continuation** ☐ **Divisional** ☐ **Continuation-in-part (CIP) of prior application**
No. .☐ **Amend the specification by inserting before the first line the sentence: --This application is a of application Serial No. , filed , now allowed.--**☐ **Cancel in this application original claims ____ of the prior application before calculating the filing fee. (At least the original independent claim must be retained for filing purposes.)**☐ **The prior application is assigned of record to Medtronic, Inc.**☐ **The Power of Attorney in the prior application is to: __.**

☐ This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) _____, filed _____.

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FEE CALCULATION	No. of Claims Filed	Claims Included in Base Fee	No. of Extra Claims	Rate	Fee
Total Claims	28	20	= 8	x 18	144.00
Independent Claims	3	3	= 0	x 86	0
Multiple Dependent Claims			0	+ 290	0
Basic Filing Fee					\$770.00
TOTAL					914.00

☒ Charge Deposit Account No. 13-2546 in the amount of \$914.00 for the filing fee.

☒ The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A duplicate of this transmittal is enclosed.

Date

26 Nov. 03


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